



Nicholas A. Toumpas  
Commissioner

Mark C. Bussiere  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER  
*BUREAU OF HUMAN RESOURCE MANAGEMENT*

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October 30, 2013

Her Excellency, Governor Margaret Wood Hassen  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Pursuant to the provisions of RSA 21-I: 43-a, Compensation for State Employees Injured in Line of Duty, finalize the determination made by the Commissioner of the Department of Health and Human Service that on On October 2, 2013, Zachary Branscom, a Mental Health Worker II at New Hampshire Hospital sustained an injury in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties which are considered dangerous in nature, effective date of Governor and Council approval.

**EXPLANATION**

New Hampshire RSA 21-I: 43-a, Compensation for State Employees Injured in Line of Duty states:

Any injury received by any state employee who is injured in the line of duty by a hostile act, or by an act caused by another during the performance of duties which are considered dangerous in nature, that requires the employee to be hospitalized or renders the employee temporarily unable to perform the duties of his or her position shall not be charged against annual leave or sick leave for the time lost due to the injury. During such time, the employee shall remain on the active payroll. In this event, no employee shall be terminated from state service until he or she has applied for disability retirement and a final decision on the application is made by the board of trustees of the New Hampshire retirement system and appeals of such decision, if any, are finalized; provided, that the employee shall make such application within 18 months of the injury contemplated by this section. **The executive head of the employee's agency shall make the determination as to whether an injury is in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties which are considered dangerous in nature, and, after approval by the governor and council, the determination shall be final.** (emphasis added) During the time in which the injured employee remains on active payroll at full base salary pursuant to this section, his or her

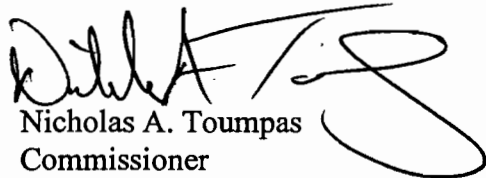
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state compensation shall not be offset by state workers' compensation payments and he or she shall not receive state workers' compensation payments to supplement his or her full base salary. Nothing in this section shall prohibit medical payments or final settlements.

Zachary Branscom is a Mental Health Worker II who was injured in the line of duty and rendered temporarily unable to perform the duties of his position. On October 2, 2013 a patient at New Hampshire Hospital assaulted Zachary Branscom causing injuries by jumping on him and striking him, he twisted his hip and was punched several times in the leg and abdomen. As a result of the injuries, Mr. Branscom required medical attention and was rendered unable to perform his duties beginning that day. He returned to work on October 6, 2013. In accord with NH RSA 21-I: 43-a Mr. Branscom's lost time has not been charged against his annual leave or sick leave and he has remained on the active payroll.

Following a thorough review of the October 2, 2013, incident and facts related to Zachary Branscom's injury, the Commissioner of the Department of Health and Human Services determined on October 2, 2013, that Mr. Branscom's injuries were in the line of duty and due to a hostile or overt act, or an act caused by another during the performance of duties, which are considered dangerous in nature. Pursuant to RSA 21-I: 43-a, approval of this Request shall make Commissioner's determination final.

Respectfully submitted,

  
Nicholas A. Toumpas  
Commissioner

**NOTICE OF ACCIDENTAL INJURY OR OCCUPATIONAL ILLNESS**  
**CONFIDENTIAL: NO PATIENT NAMES**      **SEND IMMEDIATELY TO HUMAN RESOURCES**

**EMPLOYEE IDENTIFICATION**

Name: Zachary Branscom Incident Date: 10/21/13 Time: 10:15 AM PM  
(Please print)  
Department: Nursing Unit: G Job Title: MHWIT

**EXACT LOCATION OF INCIDENT**

Building: APS Unit: G Other: \_\_\_\_\_

**OCCURRENCE DESCRIPTION**

- |                                                    |                                                                              |
|----------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Slip/Trip/Fall            | <input type="checkbox"/> Lifting Patient-Med Rec# _____                      |
| <input type="checkbox"/> Struck by/Against Object  | <input checked="" type="checkbox"/> Patient Assault-Med Rec# <u>02-91-20</u> |
| <input type="checkbox"/> Lifting Materials/Patient | <input type="checkbox"/> During Restraint -Med Rec# _____                    |
| <input type="checkbox"/> Contamination/Exposure    | <input type="checkbox"/> Needlestick/Sharp - Med Rec# _____                  |
| <input type="checkbox"/> Burn                      | <input type="checkbox"/> Bites - Med Rec# _____                              |
| <input type="checkbox"/> Other (Specify _____)     | <input type="checkbox"/> Contamination/Body Fluids - Med Rec# _____          |

**HOW DID ACCIDENT OR ILLNESS OCCUR?**

Description of incident: (Be specific, including any injuries you received and on what part of your body) While  
Medicating a pt in T/P another pt ran into the T/P room and jumped  
on top of my table and pt. He then began striking staff  
twisting my @hip and was punched several times in the leg and  
abdomen.

Total number of hours worked at time of injury: 3 1/2

STAFF WITNESSES (if any): Lita Roy, Mark Simpson, Jenna Tucker, Audrey Wells

**TREATMENT**

☐ Treatment received on site, please explain: \_\_\_\_\_  
Initial Treatment: ☐ No Medical Treatment ☒ Emergency Care ☐ Other ☐ Human Resources Called / /

\*\*\*PLEASE REVIEW OTHER SIDE AND HAVE YOUR SUPERVISOR REVIEW THIS INCIDENT REPORT\*\*\*  
PLEASE CONTACT THE HUMAN RESOURCES DEPARTMENT AT 271-5838 OR 271-5843.

EMPLOYEE'S SIGNATURE: Zachary Branscom Audrey Wells DATE: 10/21/13  
MHWIT Nursing

**SUPERVISOR'S STEPS TAKEN AFTER REVIEWING THIS INCIDENT REPORT:**

- ☐ Reviewed and discussed incident with employee before returning to work? Explain: \_\_\_\_\_
- ☐ Referred employee to call HR department.
- ☐ Reviewed work area/procedures and took appropriate steps to correct hazard.Explain: \_\_\_\_\_
- ☒ Reported incident to Assailed Staff Action Program (ASAP). ☐ Yes ☐ No

REPORT OF ACTION TAKEN sent to CH-ED for evaluation

DATE: 10/21/13

OVER  
IMMEDIATE SUPERVISOR'S NAME:

Audrey M Wells  
(PLEASE PRINT)